

SENATE BILL REPORT

SB 5820

As Reported By Senate Committee On:
Health & Long-Term Care, February 27, 2001
Ways & Means, March 8, 2001

Title: An act relating to medical assistance for breast and cervical cancer treatment for low-income women.

Brief Description: Providing assistance to treat breast and cervical cancer.

Sponsors: Senators Kastama, Hale, Fraser, Fairley, Regala, Kohl-Welles, Swecker, Prentice, Hewitt, McAuliffe, Constantine, Eide, T. Sheldon, Johnson, McCaslin, Patterson, Thibaudeau, Snyder, Oke, Horn, Deccio, Rasmussen, Winsley, Hargrove, Benton, Honeyford, Rossi, B. Sheldon, Carlson, Shin, McDonald, Kline, Haugen, Sheahan, Costa, Zarelli, Roach, West, Hochstatter, Jacobsen, Long, Morton, Spanel, Parlette, Franklin and Stevens.

Brief History:

Committee Activity: Health & Long-Term Care: 2/22/01, 2/27/01 [DPS-WM].
Ways & Means: 3/7/01, 3/8/01 [DP2S].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 5820 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Thibaudeau, Chair; Franklin, Vice Chair; Costa, Deccio, Fraser, Parlette and Winsley.

Staff: Jonathan Seib (786-7427)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Second Substitute Senate Bill No. 5820 be substituted therefor, and the second substitute bill do pass.

Signed by Senators Brown, Chair; Constantine, Vice Chair; Fairley, Vice Chair; Fraser, Hewitt, Honeyford, Kline, Kohl-Welles, Long, Parlette, Rasmussen, Regala, Rossi, Sheahan, B. Sheldon, Snyder, Spanel, Thibaudeau, Winsley and Zarelli.

Staff: Tim Yowell (786-7435)

Background: The national Breast and Cervical Cancer Early Detection Program was established by the federal government in 1990. The program provides funding to the states for breast and cervical cancer screening of women whose family income is below 250 percent of the federal poverty level. In Washington, the program is operated by the Department of

Health and tribal entities, who also provide assistance to those found to need treatment. Such treatment, however, is not paid for by the federal program.

Last October, the President signed the Breast and Cervical Cancer Prevention and Treatment Act of 2000 (Public Law 106-354). The act allows a state to provide, under Medicaid, breast or cervical cancer treatment to any woman it identifies through its Early Detection Program as needing such care.

If a state elects to exercise this option, the federal government will provide an enhanced match to pay for treatment. The enhanced match will cover approximately 65 percent of the cost, compared to the usual 50 percent match provided for other Medicaid services. Federal funds are available retroactively for items and services provided on or after October 1, 2000.

Summary of Second Substitute Bill: Eligibility for state medical assistance is modified to include women under age 65 who have been screened through a Department of Health or tribal entity breast and cervical cancer detection program, need treatment for cancer, and have no other health insurance. Eligibility is limited to the time required to treat the breast or cervical cancer.

Second Substitute Bill Compared to Substitute Bill: The program is to operate within any conditions or limitations specified in the appropriations act.

Substitute Bill Compared to Original Bill: The substitute bill added language authorizing tribal screening programs to refer women to the Medicaid program for treatment.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill contains an emergency clause and takes effect on July 1, 2001.

Testimony For (Health & Long-Term Care): It is currently difficult to get treatment resources for those women that the screening program identifies as needy. The lack of treatment options sometimes causes women to avoid being screened. The bill would provide a dignified and respectful option that would save lives.

Testimony Against (Health & Long-Term Care): None.

Testified (Health & Long-Term Care): PRO: Senator Kastama, prime sponsor; Patty Hayes, Department of Health; Bill Daley, Office of the Insurance Commissioner; C.J. Taylor, Komen Foundation; Ellen Angeles, Public Health Seattle and King County.

Testimony For (Ways & Means): If women don't have a source of payment, they will delay treatment, resulting in greater costs later in the form of charitable care for hospitals and doctors, and increased medically indigent hospital payments by the state. The Susan G. Komen Foundation is committing \$400,000 to help cover the state's costs for the program.

Testimony Against (Ways & Means): None.

Testified (Ways & Means): PRO: Senator Kastama, prime sponsor; Ellen Phillips-Angeles, Seattle-King County Health Dept.); Kevin Knox, American Cancer Society; Sally Kirkpatrick, Susan G. Komen Foundation.